In 2013 the Minnesota state legislature considered reauthorizing funding for racial integration in Minnesota schools to support opportunities for all students to succeed and improve education outcomes for students of color. The legislation would require schools that receive state funding to show progress toward integration and equity in educational opportunities.

The goal of school integration is to provide an equal opportunity for a good education, but according to a recent health impact assessment (HIA) report, integrated schools also promote better health. The report found, for example, that children of color who attend integrated schools have greater educational achievement resulting in higher incomes, and, in turn, the associated health benefits, such as improved health behaviors (for example, exercising, avoiding smoking, maintaining healthy weight, obtaining timely check-ups and screenings), birth outcomes, and mental and overall health.

Through funding to the Health Impact Project (a collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts), the Blue Cross and Blue Shield of Minnesota Foundation supported ISAIAH (a Minnesota, faith-based community organization) and Oakland, California-based Human Impact Partners to conduct a rapid HIA to help inform each step of the legislative discussion. The HIA was intended to help ensure that the connections between school integration, racial disparities in educational achievement, cross-race understanding, and health outcomes were factored into the legislature’s decisions.

The legislation passed, and this increasingly popular and effective tool—the HIA—was credited for helping inform policy that will lead to better health for Minnesota students.

UNDERSTANDING HIAS

As described by the Health Impact Project, “Health impact assessment is a fast-growing field that brings together scientific data, health expertise, and public input to identify the potential—and often overlooked—health effects of proposed new laws, regulations, projects, and programs. It offers practical recommendations for ways to minimize risks and capitalize on opportunities to improve health. HIAs give federal, tribal, state, and local legislators; public agencies; and other decision-makers the information they need to advance smarter policies today to help build safe, thriving communities tomorrow.”

HIAs help ensure that everyone has the opportunity to attain his or her full health potential in communities across the country, resulting in greater health equity. We believe that no one should be disadvantaged in reaching this potential because of his or her income, race, ethnicity, gender, sexual orientation, disability status, or neighborhood. Equally, opportunities for good health should not unfairly be determined by social and economic factors such as education, income, employment, community safety, and family and social support.

Many health problems facing Americans have roots in decisions made outside the health sector, for example, in transportation, housing, land use, education, social policy, and energy policy. As a result, these sectors are now recognized as essential partners in the effort to improve Americans’ health and build health equity. HIAs offer an approach that helps build robust collaborations between health and other sectors by providing timely, accurate, and relevant information intended for use in real-time decisionmaking.

HIAs bring together scientific data, health expertise, and public input to identify the potential health effects of proposed projects and policies, and recommend measures to minimize health risks and capitalize on opportunities to improve health. The blend of rigorous methodology and stakeholder engagement complements the Blue Cross Foundation’s upstream focus on social determinants of health.

1 The study was done by Human Impact Partners, a nonprofit research group in Oakland, California, and ISAIAH, a faith-based organization working for racial and economic justice in Minnesota, in collaboration with a panel of teachers, a school district administrator, and a school board member; parents; public health practitioners; racial justice advocates; and a member of the state’s Integration Revenue Task Force.
in place-based settings as a strategy to help people reach their full health potential.

An HIA has six basic steps:

1) **Screening**: Determines if the HIA is likely to succeed; will add value to the project, program, or policy being considered; and will be timely in the decisionmaking process.

2) **Scoping**: Creates a plan for the HIA and brings in stakeholders to help identify the health risks and benefits of the project, as well as who will be affected by the decision.

3) **Assessment**: Describes the baseline health of those affected by the project, and predicts the health effects of the project.

4) **Recommendations**: Presents actions that protect and promote health.

5) **Reporting**: Disseminates HIA conclusions to decisionmakers and stakeholders, often with a request for input before developing a final report.

6) **Monitoring and Evaluation**: Includes process, impact, and outcome evaluation and monitoring to track indicators that inform these evaluations.

**WHO IS DOING HIAS**

The use of HIAs has grown. As of March 2014, more than 300 HIAs are in progress or have been completed from coast to coast and in Alaska and Hawaii. This represents tremendous growth: In 2007 we knew of only 27 HIAs. The kinds of organizations conducting HIAs include colleges and universities, government (city, county, state, and federal), and nonprofit organizations. HIAs are informing decisions in a wide range of sectors, including transportation; the built environment; education; labor and employment; natural resources and energy; agriculture, food, and drug; community development; housing; and physical activity.

**HIAs AS A HEALTH EQUITY TOOL**

The growth of the field at the national level also is reflected in Minnesota’s momentum to use HIAs to bring health and health equity to decisionmaking. As of March 2014, 19 HIAs have been completed or are in progress in Minnesota, including seven supported by the Blue Cross Foundation.

In 2011 the Blue Cross Foundation partnered with the Health Impact Project to fund two HIA projects in Minnesota. The City of Minneapolis’ Above the Falls master plan update examined health impacts around land use redesign, particularly in economically challenged North Minneapolis through which the Mississippi River passes.

Hennepin County’s Bottineau Transitway project focused on identifying route options for traversing several neighborhoods, including North Minneapolis, where resident stakeholders have expressed that they often feel excluded from giving meaningful voice to infrastructure planning.

Since the partnership with Health Impact Project began, the Blue Cross Foundation has invested $1.4 million in seven HIAs, bringing health to decisions about addressing transportation, affordable housing and zoning, environment, education, and community design. In addition to funding HIAs and ongoing training and technical assistance for grantees, the Blue Cross Foundation and Health Impact Project provided HIA educational and training opportunities to support applicants and future HIA practitioners as they explore possible projects.

The partnership advances HIAs not only at the local level, but also at the national and state levels. Along with others, the Health Impact Project and the Blue Cross Foundation sponsored the Second National HIA Meeting last year in Washington, DC, which drew more than 400 participants. There, HIA funders from around the country began a discussion about how to keep growing the number of projects; attract additional philanthropic investment; and build the HIA field with transparent performance standards, additional practitioners, and learning opportunities.

In addition to collaborating with national partners, foundation staff works with the Minnesota Department of Health through its statewide HIA coalition to convene and support practitioners across the state. At the same time, other non-health agencies (for example, the Minnesota Pollution Control Agency), also are exploring how to incorporate health and HIA into their work. Collectively, these efforts around the state are helping build a movement.

Our collaboration has helped us champion a more equitable path to creating healthier communities by broadening the players who understand and commit to considering health as part of decisionmaking. HIAs are a strategic tool that contributes to greater health equity by having stakeholders and residents in low-income communities participate in critical decisionmaking that can have a long-term impact on a community’s health.

We strongly encourage other health funders to consider supporting HIAs as a way to integrate health and health equity in decisionmaking.

**RESOURCES**

- Health Impact Project
- Human Impact Partners
- Map of HIAs in the United States

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**VIEWS FROM THE FIELD** is offered by GIH as a forum for health grantmakers to share insights and experiences. If you are interested in participating, please contact Osula Rushing at 202.452.8331 or orushing@ghi.org.